

St. Mary's Hospital

Adult Day Services

July 28, 2005

Matt Wescott
Illinois Department on Aging Solutions Event

Dear Sir or Madam:

I would like to submit this as written testimony and request to participate in the July 6, 2005 Illinois Department on Aging Solutions Event on Reauthorization of the Older Americans Act.

My current position at St. Mary's Hospital is Nurse Manager of the Continuing Care Services division which includes Home Health, Palliative Care, Outpatient Clinic, and Adult Day Services. I have a true concern and passion for our aging community and patients.

Attached you will find an Excel spreadsheet that will assist in my request for approved "as needed" days of attendance to Adult Day Services. Adult Day Services have great difficulty obtaining a break even budget and most years experience financial loss. The service is primarily provided to benefit the community it serves and not for financial gain. Adult Day Services in many cases prevents nursing home placement by allowing clients to remain in their own or family homes. Adult Day Services in addition to preventing nursing home placement, offer many beneficial activities to clients with physical disability and/or social isolation. These activities include transportation, meals, therapeutic socialization, medication administration, minor treatment, crafts and recreational day trips.

The majority of your clients are funded by IDOA through CCP (Community Care Program) to attend Adult Day Services. The service is staffed for a 20 client capacity. On average there are 15 CCP clients per day that attend. Due to the requirement that CCP client days must be held in their absence, we are unable to maintain full capacity. Many senior citizens, including CCP clients experience illness, inability to attend in inclement weather, short and long term hospitalization, and long visits with out of state family members (snow birds). Each day a CCP client attends the Adult Day Service their days can not be replaced by another individual for 60 days following that day. This results in many unused days. These days could benefit other senior citizen CCP clients by attending additional days without jeopardizing the government's budgeted funding. If each CCP client was initially approved for a number of days per week as they are now but with an additional 2 "as needed" days per month, the Adult Day Service could substitute another client of the same pay source and maintain full capacity. This is a "win/win" solution for the service and the clients. I wish to request that these days be able to cross PSA (Planning and Service Areas) since most Adult Day Service clients attend from more than one PSA. However if this is not possible, being able to substitute client days within one PSA is a solution better than none.

I will look forward to providing testimony on July 6, 2005.

Sincerely,
Rebecca Johnson RN
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